1503-142-1641

FE7AN014

FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2015 APR 24 AM 9: 49

		<u></u>			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example over the	If typing, type lines.	12FE4M	5
L, URBAN P	ROGRESS F	OLITICAL.	ACTION (Commi	7.7EE
ADDRESS (number and street)	P.O.	BPX 2	.57		
Check if different than previously reported. (ACC)	WALTERE	BORO		<u> 5,9</u>	29.4.88
2. FEC IDENTIFICATION NU	MBER ▼	CITY A		STATE ▲	ZIP CODE ▲
C 0 0 5 28 6	61	3. IS THIS REPORT	NEW (N) OR	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5	S) Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M6)	Sep :	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q	1)	Apr 20 (M4)	Jul 20 (M7)		20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q	(C) 12-Day	n (See)	ention (12C)	General (
October 15 Quarterly Report (Q January 31 Year-End Report (V		[M	~W] / [0~0] /		in the
Year-End Report (Y July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	Election on	eral (30G)	Runoff (3	State of
Termination Report (TER)	Report for t	he: Election on	~ / [• • • • • · · · · · · · · · · · · · ·		in the State of
5. Covering Period		(1) th	rough 03		2015
I certify that I have examined the Type or Print Name of Treasurer	\mathcal{D}	SET L.	ge and belief it is t MURRA		complete.
Signature of Treasurer	Bridzi	t Mu	wy	Date 04	[3] [2015]
NOTE: Submission of false, errone	eous, or incomplete infor	mation may subject	the person signing	this Report to th	
Use Only					FEC FORM 3X Rev. 12/2004

1503-142-1642

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name URBAN PROGRE	55 POLITICAL ACTION CO	DMMITTEE
Report Covering the Period: From:	1 ' 0 1 ' 2,0 15 TO	
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,		
(b) Cash on Hand at Beginning of Reporting Period	0000	
(c) Total Receipts (from Line 19)	0000	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	[O_O_OO	
7. Total Disbursements (from Line 31)	[,,_OOOO	0000
Reporting Period (subtract Line 7 from Line 6(d))	<u> </u>	0000
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0000	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		
This committee has qualified as a multi-	candidate committee. (see FEC FORM 1M)	
	For further information contact:	/
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530	

Local 202-694-1100

FE6AN026

1503 - 142 - 1645

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name					
URBAN PROGRESS POLITICAL ACTION COMMITTEE					
Report Covering the Period: From:	01 '01 '2015 TO	03/81/2015			
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
11. Contributions (other than loans) From:					
(a) Individuals/Persons Other Than Political Committees					
(i) Itemized (use Schedule A)	0000	00.00			
(i) Nomizou (and definition ry					
(ii) Unitemized	0000	00 00			
(iii) TOTAL (add	$\bigcap_{i=1}^{n} \bigcap_{i=1}^{n} \bigcap_{i$	$\bigcap \bigcap $			
Lines 11(a)(i) and (ii)▶					
(b) Delitical Body Committees	0000	0000			
(b) Political Party Committees(c) Other Political Committees					
(such as PACs)	0000	0000			
(d) Total Contributions (add Lines	Secretary Control of Control Control Promise Secretary Control				
11(a)(iii), (b), and (c)) (Carry					
Totals to Line 33, page 5)					
12. Transfers From Affiliated/Other Party Committees	Λ	$\Delta \Omega \Omega \Delta \Omega$			
Faity Committees					
13. All Loans Received	0000	0000			
14. Loan Repayments Received	0000	0000			
15. Offsets To Operating Expenditures	Control Control of Con				
(Refunds, Rebates, etc.)		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
(Carry Totals to Line 37, page 5)					
to Federal Candidates and Other					
Political Committees	0000	0000			
17. Other Federal Receipts					
(Dividends, Interest, etc.)	0000	0000			
18. Transfers from Non-Federal and Levin Fund	ds				
(a) Non-Federal Account (from Schedule H3)	00.00	0000			
(non schedule ris)					
(b) Levin Funds (from Schedule H5)	0000	0000			
(b) Lovin I and (non conoccio i to)					
(c) Total Transfers (add 18(a) and 18(b))	0,000	0000			
	The state of the s				
19. Total Receipts (add Lines 11(d),					
12, 13, 14, 15, 16, 17, and 18(c))▶		0.000			
20. Total Federal Receipts					
(subtract Line 18(c) from Line 19)▶	0000	0000			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal		Calcinati Tour to Date
	Activity (from Schedule H4)	0000	0000
	(i) Federal Share		
	(ii) Non-Federal Share	0000	0000
	(b) Other Federal Operating Expenditures	0000	0000
	(c) Total Operating Expenditures		0000
22.	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	0000	
	Committees	0000	00.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees	0000	0000
24.	Independent Expenditures		
25.	(use Schedule E)	0000	, 0000
	(52 U.S.C. § 30116(d)) (use Schedule F)	0000	0000
ne.	Lean Dannymente Made	0000	6560
20.	Loan Repayments Made		
	Loans Made	0000	30.00
	(a) Individuals/Persons Other Than Political Committees	0000	6000
	(b) Deliving Destrict Constraints		
	(b) Political Party Committees		
	(such as PACs)	0000	0000
	(d) Total Contribution Refunds	2000	0200
	(add Lines 28(a), (b), and (c))▶	0000	2000
29.	Other Disbursements	0000	
30.	Federal Election Activity (52 U.S.C. § 30101(20))	
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0000	0000
	(2) H 1 1 0	00.00	
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0000	CODU
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0000	0000
31.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	$\sum_{i} \sum_{j} \sum_{i} \sum_{j} \sum_{j} \sum_{i} \sum_{j} \sum_{i} \sum_{j} \sum_{i} \sum_{j} \sum_{i} \sum_{j} \sum_{i} \sum_{j} \sum_{j} \sum_{j} \sum_{i} \sum_{j} \sum_{j} \sum_{i} \sum_{j} \sum_{j} \sum_{i} \sum_{j} \sum_{j} \sum_{j} \sum_{i} \sum_{j} \sum_{j$	
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	0000	0000

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
•	00.00	0000
	0,000	
Net Contributions (other than loans) (subtract Line 34 from Line 33)	00.00	00.00
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0000	0000
Offsets to Operating Expenditures (from Line 15, page 3)	0000	000
Net Operating Expenditures (subtract Line 37 from Line 36)	COOO	0000
	penditures Total Contributions (other than loans) (from Line 11(d), page 3)	Total Contributions (other than loans) (from Line 11(d), page 3) Total Contribution Refunds (from Line 28(d)) Net Contributions (other than loans) (subtract Line 34 from Line 33) Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) Offsets to Operating Expenditures (from Line 15, page 3) Net Operating Expenditures (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3. ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE OF (check only one)
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin	nd Statements m g the name and a	ay not be sold or used by any pe	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
/ URBAN PROGRESS	POLITIC	AL ACTION CON	MITTE
Full Name (Last, First, Middle Initial) A.		·;	Date of Receipt
Mailing Address	ng Address		Summaria and a summary
City	State	Zip Code	A substitution of the second of the
			Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		Signature of the state of the s
Name of Employer	Occupation	1	
Receipt For:	Aggregate	Year-to-Date ▼	-
Primary General	'	er e	
Other (specify) ▼	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	State of the second	
Full Name (Last, First, Middle Initial) B.			Date of Pagaint
Mailing Address			Date of Receipt
City	State	Zip Code	Tarana Aribaran Kabupatèn B
			Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	eren eren eren eren eren eren eren eren	The state of the s
Name of Employer	Occupation		
Receipt For:	Aggregate	Year-to-Date ▼	·
Primary General	1	er of the Charles and the Charles of E	
Other (specify) ▼	*	San Carlo San San	
Full Name (Last, First, Middle Initial) C.		·.	Date of Receipt
Mailing Address			The state of the party of the p
City	State	Zip Code	- Property Research Buse Const.
		·	Amount of Each Receipt this Period
FEC ID number of contributing	Ċ	and the second s	The state of the s
federal political committee.	1921-193	ada karangan salah da	The second section of the second section
Name of Employer	Occupation		,
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼		ang grand at the second of the second of	·
[] Gillot (oboon)) V	the sense of a	St. C. Santana Banasa	
SUBTOTAL of Receipts This Page (options	u)		0000
	·		
TOTAL This Period (last page this line nur	nber only)		

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan	ments may not be sold or us ne and address of any politic	ed by any perso al committee to	on for the purpose of sollciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
) URBAN PROGRESS PO	SLITTEAL ACTO	ON COM	MITTEE .
Full Name (Last, First, Middle Initial) A.		9	Date of Disbursement
Mailing Address .	•		Simple Confidence of the Confi
City	State Zip Code		
Purpose of Disbursement	· · · · · · · · · · · · · · · · · · ·		Amount of Each Disbursement this Period
Candidate Name		Category/	The state of the state of the first of the state of the s
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) ▼	Туре	in Merkeling in 1886 – en land≱ lande de 1896 blade en lande en lande en lande en lande en lande en lande en l En lande en
Full Name (Last, First, Middle Initial) B.	·		Date of Disbursement
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) C.	·.		Date of Diebursement
Mailing Address			
City	State Zip Code		
Purpose of Disbursement		19. No. 18. No. 18.	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	gantaria, periode a come periode de la come
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify).		in a service of the experience
SUBTOTAL of Disbursements This Page (optional)			0000
TOTAL This Period (last page this line number only	·)		, 00,00

SCHEDULE C (FEC Form 3X)

Use separate schedule(s) **PAGE** OF LOANS for each category of the **Detailed Summary Page** FOR LINE 13 OF FORM 3X NAME OF COMMITTEE (In Full) URBAN PROGRESS POLITICAL ACTION COMMITTEE
AN SOURCE Full Name (Last, First, Middle Initial) Election: Primary '. General Mailing Address Other (specify) City ZIP Code Cumulative Payment To Date Original Amount of Loan Balance Outstanding at Close of This Period TERMS Date Incurred Date Due Interest Rate 了我们离了不了的问题(不是发行中一个小女子 Yes No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount City State ZIP Code Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Occupation Mailing Address Amount ZIP Code Guaranteed State City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)...... TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page of Schedule C

Federal Election Commission, Washington, D.C. 20463 NAME OF COMMITTEE (In Full) **FEC IDENTIFICATION NUMBER** 000528661 URBAN PROGRESS POLITICAL ACTION COMMITTEE LENDING INSTITUTION (LENDER) Amount of Loan Interest Rate (APR) Full Name Mailing Address Date Incurred or Established State Zip Code Date Due A. Has loan been restructured? If yes, date originally incurred B. If line of credit, Total Outstanding Amount of this Draw: Balance: C. Are other parties secondarily liable for the debt incurred? (Endorsers and guarantors must be reported on Schedule C.) D. Are any of the following pledged as collateral for the loan: real estate, personal What is the value of this collateral? property, goods, negotiable instruments, certificates of deposit, chattel papers, 化黄油环 编作性 经制度的 人名西西克 医海绵性 stocks, accounts receivable, cash on deposit, or other similar traditional collateral? e en en elle sitte sik e sitte e til e en en en ett e sitte si Yes If yes, specify: Does the lender have a perfected security interest in it? No E. Are any future contributions or future receipts of interest income, pledged as What is the estimated value? Yes If yes, specify: collateral for the loan? No Location of account: A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Address: Date account established: (数字)かですであずからどとど City, State, Zip: If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment. G. COMMITTEE TREASURER DATE Typed Name Signature Attach a signed copy of the loan agreement. TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This Institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan. AUTHORIZED REPRESENTATIVE Typed Name Title Signature

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

(Use separate schedule(s)

PAGE OF FOR LINE NUMBER:

ХC	luding Loans	าบ	ror each imbered line)	(Check only one)	9
ΙA	ME OF COMMITTEE (In Full)	····		7	
	URBAN PROGRESS POLITICAL ACTION	Commi	TIEE	•	
T	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			ebt (Purpose):	
ļ		<u>;</u> ;		•	•
t	Mailing Address	<u></u>	-		
ŀ	City State Zip Code				
	Outstanding Balance Beginning This Period				
-					
	Amount Incurred This Period Payment This Pe	eriod	Outstandi	ng Balance at Close of	This Period
	And the second section of the s	• •	1 1 20		
ŀ	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purpose):	······································
ł	Mailing Address		·	•	
ļ	City State Zip Code	·	_		
	Only State 24 Code				
	Outstanding Balance Beginning This Period				
1	Sant our Brown of the Comment				
İ	Amount Incurred This Period Payment This Period	eriod 	Outstandi	ng Balance at Close of	This Period
	en Britania de Caracteria de C	100	The second	and the state of the second	i Lateratura
ŀ	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purpose):	·····
l	Mailing Address		\dashv		
	City State Zip Code	***			
	Only Time Display				
	Outstanding Balance Beginning This Period				
	and the religion of the Common and American will be the religion of				
	Amount Incurred This Period Payment This Pe	eriod		ng Balance at Close of	
	i (n. 1865). Digital di kanala di kanala kanala kanala di Malaman i Digital kanala kanala kanala kanala kanala kanala kanal	s, turis, in		A. Francis C. Markey and A.	i Graffi official
11	SUBTOTALS This Period This Page (optional)		a tat	0	000
	TOTALS This Period (last page this line number only)				000
	TOTAL OUTSTANDING LOANS from Schedule C (last page only)				000
√ 1 —					$\Delta \Delta \Delta \Delta$
4١	ADD 2) and 3) and carry forward to appropriate line of Summary Rang (last	Aulan open			ハンしんしょ

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES PAGE FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ URBAN PROGRESS POLITICAL ACTION COMMITTEE CO052 New report Amends report filed on Check if 24-hour report 48-hour report Full Name of Payee Date of Public Distribution/Dissemination [D_n_D_] \ Mailing Address Amount City State Zip Code Date of Disbursement or Obligation Purpose of Expenditure D D 1 Category/ Type Name of Federal Candidate Office Sought: Support House District: Oppose President Senate State: Disbursement For: Primary General Calendar Year-To-Date Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination D 0 / Y Mailing Address Amount City State Zip Code Date of Disbursement or Obligation Purpose of Expenditure (D D / Category/ Туре Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State: Disbursement For: Primary General Calendar Year-To-Date Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Uniternized Independent Expenditures (c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

whay

Date

04

1 3

2015

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

PAGE (2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election) FOR LINE 25 OF FORM 3X NAME OF COMMITTEE (In Full) Full Name of Subordinate Committee coordinated expenditures by a political party committee? YES MO NO Mailing Address If YES, name the designating committee: City State ZIP Code Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure Category/ Mailing Address Type City State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate I Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Type Mailing Address State, Zip Code City Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate SUBTOTAL of Expenditures This Page (optional)...... TOTAL This Period (last page this line number only).....

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

	•				
NAME OF COMMITTEE (in Full)					
URBAN PROGRESS POLITICAL ACTION CON	MMITTEE				
USE ONLY ONE SECTION	, A or B				
A. State and Local Party Committees					
Fixed Percentage (select one)					
Presidential-Only Election Year (28% Federal)					
Presidential and Senate Election Year (36% Federal))				
Senate-Only Election Year (21% Federal)					
Non-Presidential and Non-Senate Election Year (15%	6 Federal)				
B. Separate Segregated Funds and Nonconne	ected Committees				
If the committee will allocate using the flat minimum percenta	age of 50% federal funds, check				
or	desets				
If the committee is spending more than 50% federal funds, in	ndicate ratio below				
Federal	gir region with a spiriting or of great gr				
Nonfederal	grande a proceedings of the control of the second of the control o				
This ratio applies to (check all that apply):					
Administrative Generic Voter Drive Public	Communications Referencing Party Only				

SCHEDULE H2 (F **ALLOCATION RAT**

ACTIVITY IS:

ACTIVITY IS:

Fundraising CHECK IF THE RATIO IS:

Fundraising. CHECK IF THE RATIO IS:

New

ACTIVITY OR EVENT IDENTIFIER

Revised

Revised

Direct Candidate Support

Direct Candidate Support

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS		PAGE OF				
NAME OF COMMITTEE (IN FUII) URBAN PROGRESS POLITICAL ACTION C	OMMITTEE					
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDID. ACTIVITIES APPEARING ON THIS REPORT.	ATE SUPPORT					
Methods of allocation:		•				
 FUNDRAISING activities are allocated using the "funds received me expenses must equal the federal proportion of monies raised. 	thod) where the federal pr	oportion of				
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated acc where the federal proportion of disbursements is based on the bene tivity. For PACs Only: Direct candidate support includes public comfederal and nonfederal candidates, regardless of whether there is a are allocated using a time/space method.	fit derived by federal cand nunications or voter drive:	lidates from the ac-				
ACTIVITY OR EVENT IDENTIFIER						
ACTIVITY IS:	FEDERAL %	NONFEDERAL %				
ACTIVITY IS: [Fundraising Direct Candidate Support Section Section						
CHECK IF THE RATIO IS:	A Section of the second section of the section of the second section of the second section of the second section of the sectio	1 10 10 10 10 10 10 10 10 10 10 10 10 10				
New Revised Same as Previously Reported						
ACTIVITY OR EVENT IDENTIFIER						

FEDERAL %

Same as Previously Reported

Same as Previously Reported

NONFEDERAL %

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE		C	F		
}	٠.				
FOR L	INE	182	OE	FORM	2 V

	F COMMITTEE (In Full)	Car Anti a	POH LINE 188 OF FORM 3X
	RBAN PROGRESS POLITI	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
BRE/	KDOWN OF TRANSFER RECEIVED		
1)	Total Administrative	· · · · · · · · · · · · · · · · · · ·	Andrew State of the Control of the C
	Generic Voter Drive		anders and the state of the sta
}	Exempt Activities		A CONTRACTOR OF THE SECTION OF THE S
	,	generalisas et estados estados de la composição de la composição de la composição de la composição de la compo La composição de la compo	
	a)		
	b)	A second second	É
}	c) Total Amount Transferred For Direct Fundra		Because the second section of the second sec
V)	Direct Candidate Support (List Activity or Ev		
	a)	and the second of the second o	
	b)		sa Barana da serena de la sura de la compaña Barana de serena de la compaña de la comp
	c) Total Amount Transferred For Direct Candid	late Support	till og skriveredtre til sammer som en store skriver. De tre til til skriver skrivet fra til skriver skriver skrivet skriver.
vI)	Public Communications Referring Only to I		_
	· ·	DR BREAKDOWN OF TRANSFER RECEIVE	en de Lange Coeges
TOTAL	This Period (Administrative)		
TOTAL	This Period (Generic Voter Drive)	The state of the s	0000
TOTAL	This Period (Exempt Activities)	ا که در	0000
TOTAL	This Period (Direct Fundraising)		, 0000
TOTAL	This Period (Direct Candidate Support)		0000
TOTAL	This Period (Public Communications Referring	Only to Party)	0000
(OTAL	This Period (Total Amount Transferred)	•	0000

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE OF FORM 3)

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SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

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(To be used by State, District and Local Party Committees Only)

PAGE	= ·.		OF		
FOR	LINE	30a	OF	FORM	3X

IAME OF COMMITTEE (In Full)			
URBAN PROBRESS POLITICAL ACTIO	r comm	111766	
A. Full Name (Last, First, Middle Initial) / Full Organization Name	·-·-	Type of Allocated Activity or Event:	
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		Voter ID Generic Campaign	
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SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

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	(b) Unitemized	0000	, 000	
	(c) Total	, 0000	0001	
	OTHER RECEIPTS	, , 0000	0000	
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	(b) Voter ID	, , 00,00	000	
	(c) GOTV	, 0000		
	(d) Generic Campaign	0000	000	
	(e) Total	, 0000	0000	
	OTHER DISBURSEMENTS			
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	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)	0000		
	RECEIPTS	0000		
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	DISBURSEMENTS	0000		
	ENDING CASH ON HAND(Subtract Line 10 From Line 9)		000	

SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

Use separate schedule(s) for each category of the Aggregation Page

FOR LINE NUMBER: (check only one)

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OF

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for fo	or commercial purposes, other than using the name and address of any political committee to	o solicit contributions from such 'committee.
/ N	IAME OF COMMITTEE (In Full)	
/	URBAN PROGRESS POLITICAL ACTION COM.	WITTE
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SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE (check only one) OF Use separate schedule(s)

OF LEVIN FUNDS	for each category of the Aggregation Page	4a · 4c 5
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add	not be sold or used by any persol fress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
/ URBAN PROGRESS POLITICA		MITTEE .
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TOTAL This Period (last page this line number only).....

Walterboro, SC 29488

Urban Progress PAC P.O. Box 257

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Federal Election Commission Washington, D.C. 20463 999 E Street, NW

Form 3x

(3/2015)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt** Hand Delivered Date of Receipt Postmarked USPS First Class Mail Postmarked (R/C) USPS Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): PREPĂRER